

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name

: CORPORATION SERVICE COMPANY

Account Number : I2000000195 Phone

: (850)521-1000

Fax Number

: (850)558-1575

REGISTERED AGENT CHANGE

AFFINITY INTERNET, INC.

Certificate of Status	0
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Corporate Filing Menu

Help

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Plorida Statutes, thi hange is submitted for a corporation organized under the laws of the State of $\frac{Delaware}{Delaware}$	5	
	der to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of	f the corporation: AFFINITY INTERNET, INC.		
2. The principa	al office address: 3250 W. Commercial Blvd., Suite 200, Ft. Lauderdale, FL 33309		
3. The mailing	address (if different):		
4. Date of inco	proporation/qualification: January 22, 2002 Document number: F02000000352		
	nd street address of the current registered agent and registered office on file with the artment of State:		
	John Ranieri		
	3250 W. Commercial Blvd., Suite 200		
	Ft. Lauderdale, FL 33304	TAS	0
6. The name ar (if changed):	nd street address of the new registered agent (if changed) and /or registered office :	ECRETA LLAHAS	7 SEP I
	Corporation Service Company	ETARY C	2
	1201 Hays Street	OF S	PH
	(P.O. Box NOT accopyable)	TATE ORID	2:2
	Tallahassee, FL 32301	DA DA	8
The street addi as changed wil	ress of its registered office and the street address of the business office of its registered Il be identical.	agent,	
Such change wanthorized by	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the comoration has been notified in writing of the change.		
<i>Y J</i> .	Maureen Cullen, Attorney In Pact		
` ~ 1	three of an officer of director) (Printed or typed name and title)		
I hereby accep I further agree of my duties, a document is be corporation ha	of the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete perfound I am familiar with and accept the obligation of my position as registered agent. One eing filed merely to reflect a change in the registered office address. I hereby confirm the season notified in writing of this change.	rmance r, if this hat the	
By: Corporatio	Chelle R Landon Sept 11 80000 Signature of Registered Agent)	·	
If signing on b	ehalf of an entity:		
	nnoy, Asst. Vice President		
	(Typod or Printed Name)		
	* * * FILING FEE: \$35.00 * * *		

AFFROYE

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)